

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1/11	70591	8/12
O.I.P.E. CLASSIFIER		42	3/22/77
FORMALITY REVIEW	RT	515	10-03-07
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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